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Safe and Healthy Sleep for Infants and Young Children in partnership with Region 9 Head Start Association

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▪ **Presenter Disclosure:**

- **Financial Disclosures:** Charlotte Hendricks received an honorarium for this presenting this course. She is the owner of ChildHealthOnline, LLC training and consulting company, providing consultation to local, state, regional, and national organizations. She is the author of a number of books on health and safety topics.
- **Non-Financial Disclosures:** Charlotte Hendricks has no relevant non-financial relationships to disclose.

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Learning Outcomes

After this course, participants will be able to:

- List ways to reduce the risk of SUIDs/SIDS.
- Describe how to ensure a safe sleep environment for infants and young children.
- Describe sanitation practices to reduce the risk of disease transmission.

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Infant Sleep Safety

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SUID/SIDS is the leading cause of death for infants.

- **Sudden Unexpected Infant Deaths (SUIDs)** are deaths that occur suddenly and unexpectedly in previously healthy infants.
- **Sudden Infant Death Syndrome (SIDS)** is one subgroup of SUID.
- **SUID** includes accidental suffocation.

There are about 3,500 SUIDs in the US each year.

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Risk Factors for SUID/SIDS

- Prematurity and/or low birth rate
- Maternal smoking during pregnancy
- Second-hand smoke

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Risk Factors for SUID/SIDS

- Sleeping space other than a crib
- Sharing a bed with others
- Quality of supervision at time of death
- Obesity, fatigue, or drug/alcohol use by person supervising or sleeping with child

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Risk Factors for SUID/SIDS

- Infants sleeping on their stomachs
- Soft sleep surfaces
- Loose bedding, toys, or other objects in crib
- Faulty design of crib or beds
- Overheating

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Lower the Risk Factors

- Promote breastfeeding. Provide breastfeeding mothers a comfortable place with privacy, comfortable chairs, clean blankets, and access to electrical outlets.
- Encourage families to schedule and go to all well-child visits.
- Keep the environment smoke free, including staff vehicles and clothing.

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Sleep Position Policy

- Infants should be placed on their backs for every nap or sleep time!
- If an infant consistently rolls over to his side or tummy, it's okay. But always start with infant on their back.
- Require a signed waiver from the child's primary health care provider if an alternate sleep position is required.

Q1

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Crib Safety

- Every infant has their own crib.
- Cribs are only for sleeping. Do not attach mobiles or play equipment to crib.
- If infant falls asleep in safety seat, chair, or other furniture/equipment, immediately place the sleeping infant on their back in crib.

Q2

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Crib Safety

- Crib meets CPSC (2011) and ASTM standards.
- Read the instructions! Assemble cribs properly and make sure hardware is secure.
- Do not use broken or modified cribs.
- Evacuation cribs must also meet standards.

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Crib Safety

- Mattresses are supported, firm, and fit tightly. No gaps larger than two fingers between crib and mattress.
- Crib sheets fit securely.
- Avoid blankets, pillows, bumper pads, and stuffed toys.

Q3

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Crib Safety

- Room should be a comfortable temperature for an adult in lightweight clothes.
- Dress infants in footed pajamas. Infants should be dressed in only one layer more than you are wearing.
- Swaddling infants is not necessary or recommended in childcare. If parents swaddle babies, they should make sure it is not too tight. When babies try to roll over, stop swaddling.

Q4

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Crib Placement

AVOID placing cribs:

- Near doors where parents enter the room. Never place diaper bags or other objects in crib.
- Under shelves which hold objects.
- Near unsecured cabinets.
- Near hanging window cords, electrical cords, baby monitor cords, or strings (e.g., mobiles).

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Crib Placement

- Evacuation cribs can be used for sleep.
- Should have design and wheels to carry up to five infants and toddlers.
- Place evacuation cribs for easy access to doorway.

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Pacifiers

- Pacifiers may reduce the risk of SIDS, even if it falls out after the infant is asleep.
- Do not attach a pacifier on long string/ribbon or on a beaded ribbon. Do not use pins.
- Never prop bottles or allow an infant to take a bottle to bed!

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Sleep Supervision

- A caregiver trained in safe sleep practices should always be present and alert!
- Position cribs for access to and visibility of each child.
- Room lighting must allow caregiver to see each infant's face, view skin color, and check on breathing.

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Sanitation

- Each child has his or her own crib.
- Clean and disinfect cribs weekly or when soiled.
- Clean and disinfect between use by different children.

Follow current local, state, and federal recommendations for sanitation.

Q5

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Advise parents about safe sleep.

- Room share the first 6-12 months, but do not bed share!
- Never place infant to sleep on soft surface, couch, sofa, or armchair.
- Only bring infant into your bed to feed or comfort. If there is any possibility you might fall asleep, make sure there are no pillows, sheets, or other items that could cover your infant's face and neck or overheat your infant.

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Toddlers and Preschoolers Naptime

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Cots and Mats

- Provide an individual cot, sleeping bag, bed, mat, or pad for each child.
- Children should not sleep on a bare, uncovered surface. Do not place mats/sleeping bags directly on a floor that is cooler than 65 degrees.
- All furniture and sleep surfaces must be in compliance with current CPSC and ASTM safety standards. Be aware of recalls.
- Toddlers and older children may have small pillows or special sleep toys.

Q6

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Placement

- Place cots at least 3' apart.
- Head to toe sleeping reduces transmission of respiratory secretions. This also reduces interaction and promotes settling.
- Ensure visibility and easy access to children.
- Have clear pathways to exits.

Q7

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Placement

- Never place cribs, cots, or mats near hanging cords or strings or under shelves with items that could fall.
- Make sure electrical outlets – both in use and unused - have secure coverings.



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Placement

- Screens to separate sleeping children are NOT recommended! They can affect visual supervision, interfere with immediate access, and potentially injure a child if pushed over.
- Have clear pathways to exits.
- Practice an emergency drill during naptime to ensure staff know what to do.

Q8

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Storage

- Store cots out of way. If they are stacked, make sure they won't tip over.
- Store each child's sheets, blankets, pillows, mats, and special sleep toys in individual cubbies.

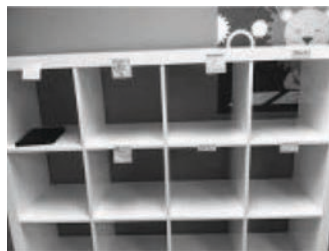


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Sanitation

- Mats and cots should be made with waterproof material that can be easily washed/disinfected.
- Enclose pads in washable covers. Pads should be long enough for children's full length.

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Sanitation

- Provide clean sheets, sleep garments, or blankets to maintain adequate warmth.
- Pillows should have removable, washable cases.
- Any special sleep items are only used at naptime.

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Sanitation

- Local, state, and federal recommendations for cleaning and disinfecting may change in response to COVID-19.
- Check CDC.gov for updated recommendations.
- Create and follow a daily checklist for cleaning and disinfecting surfaces.

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Sanitation

Normal routine cleaning with soap and water will decrease germs on surfaces and objects.

- Wash and disinfect cots and bedding weekly and when soiled.
- Wash cots and bedding between uses if used by different children.
- Launder items according to manufacturer's instructions. Use the warmest appropriate water and dry items completely.

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Sanitation

- Most common EPA-registered household disinfectants should be effective.
- Alternative disinfectants can be used:
 - 1/3 cup bleach added to 1 gallon of cool water. Mix fresh solution daily.
 - 70% (or higher) isopropyl or ethyl alcohol solutions.

NEVER combine cleaning or disinfectant products!

Keep all cleaning and disinfectant products out of children's sight and out of reach.

Q10

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Relax!

Slow down the naptime routine and help children relax and de-stress.

“You can sleep now. I am watching over you.”

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